FROM THE WEBSITE

Page Updates

CareSearch Refresh

CareSearch has been a source of palliative care evidence, information and resources to health professionals and patients and families for over eight years. In that time, we have increased the amount of content held on CareSearch and there have been many changes in the way that people engage with online resources. We are now in the era of smart phones and social media. So, in the coming months we will be making some changes to the CareSearch website. This will make it easier for you to find information and to use the website on different devices.

We’re working hard to make sure your access to the site is not affected while we make these changes. But if you find a problem email us at caresearch@flinders.edu.au.

New Blogs on Palliative Perspectives

The following blogs were published during September 2016

- ‘Something vital was missing throughout that process for Maria and her family’
- A Rewarding Place to Work: My Personal Perspective on Paediatric Palliative Care (PPC)
- PaCCSC RAPID Pharmacovigilance program
- Free palliative care online training helping people live well with chronic illness

Please feel free to share these blogs with your colleagues and friends on Twitter, LinkedIn, via email, or wherever you spend time online.

Newsletters

The September 2016 edition of the ALLIEDhealth[HUB] newsletter is now available.

The first PCACE Project News is now available

Conference Activities

CareSearch has been involved in a number of conferences. We may be there in a booth or we may be involved in oral and poster presentations. You can check out our presentations on the CareSearch Conference Presentations page.
CareSearch Review Collection

Twenty reviews were added to the CareSearch Review Collection in September. They included:

  Nursing assistants are the largest aged care workforce providing care to older people in residential aged care facilities. This review examined the tools used to assess their skills, knowledge and attitudes to a palliative approach to care in residential aged care. Ten studies using seven instruments were reviewed.

  This Cochrane review looked at the effectiveness of opioid drugs in relieving the symptom of breathlessness in people with advanced disease due to malignancy, respiratory or cardiovascular disease, or receiving palliative care for any other disease. Twenty six studies with 526 participants were included. Inconsistency in the reporting of outcome measures and low numbers of participants in the included studies affected the quality of the studies. The authors concluded that low quality evidence suggests a benefit from the use of oral or parenteral opioids to palliate breathlessness. They found no evidence to support the use of nebulised opioids.

  This review sought to assess the published research literature on end-of-life (EOL) care in prisons. Nineteen articles met the inclusion criteria with over half reporting findings from qualitative studies. Nearly all studies were from the US. Care was typically provided by prison health care staff including professional staff, corrections officer and inmate carers. The authors noted that the review highlighted the challenges in providing end-of-life care in the prison environment but described its transformational effects on participants.

  This review examined the actual place of death and preferred place of care and/or death in rural palliative care settings. Twenty five studies described actual place of death and 12 preferred place of care or death. Two studies reported both. Home was the preferred place of rural death and there seemed to be a greater chance of a home death than in cities. The authors noted that the rural data was often embedded in population reports rather than specific rural studies.

  This review looked at approaches to capturing the financial costs and implications of caring for family members receiving palliative/end-of-life care. Twelve articles met the inclusion criteria. They described various approaches to capturing data on the financial costs of care-giving at the end of life. The majority of approaches used structured questionnaires and were administered by personal interview, with most studies using longitudinal designs. The authors noted the need to develop methods which accurately and sensitively capture the financial costs of caring at the end of life.
CareSearch Grey Literature

This dataset includes abstracts of Australian ‘grey’ literature relevant to palliative care. They provide access to work in progress, areas of reflection and development, as well as work that may not be published in traditional avenues. The following three poster abstracts are from the 2016 Palliative Care Nurses Australia conference.

- Fraser, Claire
  *Building workforce capacity through inter-specialty ward exchange: An innovative ward-based method to meet the nursing care needs of palliative and supportive care patients*

- McIntyre, Larissa; Taylor, Rita
  *Reflections on a decade of advanced care planning (ACP) in residential aged care (RAC)*

- Hosie, Annmarie; Agar, Meera; Lobb, Elizabeth; Davidson, Patricia M; Phillips, Jane
  *What is required to improve the recognition and assessment of delirium by nurses in palliative care inpatient units? A mixed methods study*

To access these abstracts or other items from the CareSearch Grey Literature, enter the author's name, the abstract title, or search terms that describe your interest.

Partner Projects

Advance

Advance is a new training package and set of resources developed by HammondCare, with a focus on initiating palliative care and advance care planning. It’s specifically designed for nurses working in general practice. General practices provide ongoing care for a large number of patients with chronic, debilitating and eventually fatal diseases and general practice nurses have a key role in patient management. This course is APNA Endorsed and free to nurses working in Australian general practice and includes training, face-to-face workshops and CPD recognition.

Decision Assist

Decision Assist has prepared a series of webinars looking at the fundamentals of advance care planning. Topics include communication, diversity, grief and loss, recognising when a person’s condition is changing, and how to assist people with planning for their current and future care. The Decision Assist Phone Advisory Service can support health professionals working with older Australians by answering advance care planning and palliative care queries. Call 1300 668 908 with specialist advance care planning staff are available to take calls from 9am until 5 pm Monday to Friday (AEST) and specialist palliative care advice is available 24 hours / 7 days a week.

The palliAGED apps for nurses and GPs are also a useful free resource.
WHATS NEW IN THE COMMUNITY?

Human Services Reform

The Productivity Commission’s preliminary finding is that there are six priority areas where introducing greater competition, contestability and informed user choice could improve outcomes for people who use human services, and the community as a whole. Specialist palliative care is one of these areas. The report suggests that introducing greater competition, contestability and informed user choice can improve the effectiveness of human services. The community is invited to examine the preliminary findings report and make written submissions by Thursday 27 October 2016.

Causes of Death, Australia 2015

The Australian Bureau of Statistics report ‘Causes of Death, Australia 2015’ shows that 159,052 people died in 2105. Heart disease, dementia strokes, lung cancer and chronic respiratory disease are top 5 causes. Dementia deaths are rising as the population ages.

New service supports care for people with dementia

Nightingale Nurses is a new initiative and model of care developed by Alzheimer’s Australia SA which aims to meet the needs of people living with dementia and their families. They also recognise the value of a palliative approach to care.

Palliative Care Triage Research invitation

If you could only admit one patient to your service today but you have many referrals, which patient would you choose? Palliative Care is in urgent need of a robust and evidence-based system for triaging referrals in an equitable, efficient and transparent manner. If you are a health professional in Australia or New Zealand (other countries coming soon) working primarily in palliative care with at least two years of experience, we want to know your views! Please take part in this world-first online experiment at www.tinyurl.com/palliativetriage or for more information contact Dr Beth Russell at email beth.russell@svha.org.au

Australian Burden of Disease Study: impact and causes of illness and death in Aboriginal and Torres Strait Islander people 2011

This report provides estimates of the non-fatal and fatal burden of disease for the Aboriginal and Torres Strait Islander population; as well as estimates of the gap in disease burden between Indigenous and non-Indigenous Australians. The disease groups causing the most burden among Indigenous Australians in 2011 were mental and substance use disorders, injuries, cardiovascular diseases, cancer and respiratory diseases. Indigenous Australians experienced a burden of disease that was 2.3 times the rate of non-Indigenous Australians.

Guidelines for multimorbidity

A new guideline for multimorbidity designed to optimise care by reducing treatment burden (polypharmacy and multiple appointments) and unplanned care, aims to improve quality of life by promoting shared decisions based on what is important to each person in terms of treatments, health priorities, lifestyle and goals.
Dementia care needs include palliative care

The World Alzheimer Report 2016 reviews the state of healthcare for dementia around the world, and recommends ways that it can be improved. Four main themes emerged from the reviews conducted for the report; the need to systematise care processes; the challenges of managing complexity; the need for more research to inform policy and practice; and the potential for efficiency, through moderating costs while scaling up coverage of basic dementia healthcare services.

Australia's Health 2016

This AIHW report profiles current health issues in a collection of feature articles and statistical snapshots that cover a range of areas. Topics include health status of Australians, health expenditure, major causes of ill health, determinants of health, health through the life course, health of Indigenous Australians, preventing and treating ill health and health system performance.

EDUCATION OPTIONS

The revised Education section provides links to a range of education, learning and training opportunities relevant to palliative care and end-of-life care. If you are part of the health workforce and interested in exploring your learning options, check out the following:

- **Major Education Initiatives**
  Most of these have been funded by the Australian government and education, training, quality improvement and advance care planning.

- **Formal Qualifications**
  These pages provide information on Australian universities and organisations which offer postgraduate programs in palliative care.

- **Conferences**
  Details on national and international conferences relevant to palliative care.

- **Short Courses and Workshops**
  Short courses and workshops provide opportunities for ongoing professional development.

- **Web Based Learning**
  Online resources are becoming common. The modules included on this list have been appraised for the quality of their content, and their relevance for palliative care.

- **Clinical Experiences**
  These clinical experiences may include clinical attachments, practical learning opportunities and clinical placements.

You can find all of these resources in the Education section of CareSearch.
PROMOTIONAL MATERIALS

Many services and organisations are making use of the CareSearch promotional materials and have ordered factsheets or brochures for staff, patients and for their families. Materials can also be ordered for education and training activities. If you would like to order materials please visit our online order form or email caresearch@flinders.edu.au.

We will be releasing some new materials for World Hospice and Palliative Care Day and for National Carers Week so, keep an eye out for these new CareSearch resources in October.

Do not forget you can follow what is happening on Twitter or you can join us on CareSearch LinkedIn.

November 2016 Newsletter

The next newsletter will be circulated on the first Monday in November 2016. If you have any item you would like to have considered for inclusion please send details by Wednesday October 26 to caresearch@flinders.edu.au.